| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF MICHIGAN | - | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | |
|----|--|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on | Jay | | Sandra |
| | your government-issued picture identification (for | First name | | First name |
| | example, your driver's | Alan | | Louise |
| | license or passport). | Middle name | | Middle name |
| | Bring your picture | Wendel | | Wendel |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8928 | | xxx-xx-2408 |

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|---|---|---|--|--|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ■ I have not used any business name or EINs. | | | |
| Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | EINs | EINs | | | |
| Where you live | 8202 Busko St. Warren MI 48093-2876 | If Debtor 2 lives at a different address: | | | |
| | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | Macomb | | | | |
| | County | County | | | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) Business name(s) Business name or EINs. Business name or Eins. | | | |

| Debtor 1 Jay Alan Wendel Sandra Louise We | | ndel | | | | Case number (if known) | | |
|---|--|--|-----------------|----------------------------|---|--|--|---------------|
| Par | t 2: | Tell the Court About \ | /our Bank | ruptev C | 250 | | | |
| 7. The chapter of the | | | Check or | ne. (For a | | | d by 11 U.S.C. § 342(b) for Individuals Filing for Ba | ankruptcy |
| | | sing to file under | ■ Chap | ter 7 | | | | |
| | | | ☐ Chap | | | | | |
| | | | ☐ Chap | | | | | |
| | | | ☐ Chap | | | | | |
| | | | — 0.1.4p | 101 10 | | | | |
| about how you | | | | out how yo der. If your | ou may pay. Typically, if you attorney is submitting your | are paying the fe | check with the clerk's office in your local court for nee yourself, you may pay with cash, cashier's check behalf, your attorney may pay with a credit card or | k, or money |
| | | | | | y the fee in installments. It see in Installments (Official Fe | | option, sign and attach the Application for Individua | als to Pay |
| | I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By but is not required to, waive your fee, and may do so only if your income is less than 150% of the offic applies to your family size and you are unable to pay the fee in installments). If you choose this option | | | | | if your income is less than 150% of the official pov | verty line that | |
| | | | | | | | (Official Form 103B) and file it with your petition. | nust till out |
| 9. | bank | you filed for ruptcy within the | ■ No. | | | | | |
| | last 8 | 3 years? | ☐ Yes. | | | | | |
| | | | | District | | When | | |
| | | | | District | | When | Case number | |
| | | | | District | | When | Case number | |
| 10. | | any bankruptcy s pending or being | ■ No | | | | | |
| | filed not f you, | by a spouse who is iling this case with or by a business er, or by an | ☐ Yes. | | | | | |
| | | | | Debtor | | | Relationship to you | |
| | | | | District | | When | Case number, if known | |
| | | | | Debtor | | | Relationship to you | |
| | | | | District | | When | Case number, if known | |
| 11. | | ou rent your | □ No. | Go to | line 12. | | | |
| | resid | lence? | Yes. | Has yo | our landlord obtained an evi | ction judgment aga | gainst you and do you want to stay in your residenc | ce? |
| | | | _ 100. | | No. Go to line 12. | | | |
| | | | | ■ | | ent About an Evicti | etion Judgment Against You (Form 101A) and file it | with this |
| | | | | | | | | |

| | otor 1 Jay Alan Wendel Sandra Louise We | endel | | | Case number (if known) |
|-----|---|-----------|---------------------------|---|--|
| Par | t 3: Report About Any Bu | ısinesses | You Owr | n as a Sole Proprie | tor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | e and location of bus | siness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | e of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | per, Street, City, Sta | te & ZIP Code |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: |
| | | | | Health Care Busir | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline | s. If you ir s, cash-f | ndicate that you are low statement, and f | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of rederal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am ı | not filing under Chap | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am I Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am i | filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | Hazardo | ous Property or An | y Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | |
| | | | | ., | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | |
| | - , | | | | Number, Street, City, State & Zip Code |
| | | | | | |

Debtor 1 Jay Alan Wendel Debtor 2 Sandra Louise Wendel

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| | tor 2 Sandra Louise We | endel | | Case nu | Case number (if known) | | | |
|-----|--|--|---|---|---|--|--|--|
| Par | 6: Answer These Quest | ions for Repo | rting Purposes | | | | | |
| 16. | What kind of debts do you have? | | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | | | No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | No. Go to line 16c. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16c. Sta | ate the type of debts you owe the | at are not consumer debts or bus | siness debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. Ia | m not filing under Chapter 7. Go | to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | | | u estimate that after any exempt e to distribute to unsecured credit | property is excluded and administrative expenses tors? | | | |
| | administrative expenses are paid that funds will | | No | | | | | |
| | be available for distribution to unsecured creditors? | | Yes | | | | | |
| 18. | How many Creditors do | 1 -49 | | □ 1,000-5,000 | 2 5,001-50,000 | | | |
| | you estimate that you owe? | ☐ 50-99 ☐ 100-199 ☐ 200-999 | | □ 5001-10,000 □ 10,001-25,000 | ☐ 50,001-100,000 ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to be worth? | \$0 - \$50,0 \$50,001 - \$100,001 \$500,001 | \$100,000 - \$500,000 | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| 20. | How much do you estimate your liabilities to be? □ \$0 - \$50,000 □ \$50,001 - \$100,000 ■ \$100,001 - \$500,000 | | \$100,000 - \$500,000 | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | | | |
| | | □ \$500,001 - \$1 million | | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |
| Par | 37: Sign Below | | | | | | | |
| For | you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. | | | | | | |
| | | | | | ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. | | | |
| | | | | y or agree to pay someone who i ce required by 11 U.S.C. § 342(b | s not an attorney to help me fill out this). | | | |
| | | I request relie | ef in accordance with the chapte | er of title 11, United States Code, | specified in this petition. | | | |
| | | | | | ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 | | | |
| | | /s/ Jay Alaı | | | ouise Wendel | | | |
| | | Jay Alan W Signature of | | Sandra Loui Signature of De | | | | |
| | | Executed on | September 15, 2016 MM / DD / YYYY | | September 15, 2016 MM / DD / YYYY | | | |

| Debtor 1 Debtor 2 | Jay Alan Wendel Sandra Louise Wendel | Case number (if known) | |
|----------------------|---|------------------------|--|
| | | | |
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Joshua B. S | Sanfield | Date | September 15, 2016 |
|-------------------------|------------------------------|---------------|--------------------------|
| Signature of Attor | ney for Debtor | | MM / DD / YYYY |
| Joshua B. San | field | | |
| Printed name | | | |
| Law Offices of | Joshua B. Sanfield, P.L.L.C. | | |
| Firm name | | | |
| 28850 Mound I | Rd. | | |
| Warren, MI 480 | 92 | | |
| Number, Street, City, S | tate & ZIP Code | | |
| Contact phone 580 | 6-573-9000 | Email address | joshuasanfield@gmail.com |
| P66184 | | | |
| Bar number & State | | | |

| Fill in this information to identify your case: | | | | | | |
|---|--------------------------|------------------|-------------|--|--|--|
| Debtor 1 | Jay Alan Wendel | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT | OF MICHIGAN | | | |
| Case Number (if known) | | | | | | |

Official Form 101A

Initial Statement About an Eviction Judgment Against You

12/15

| File this form with the court and serve a copy on your landlord when you first file bankruptcy only if: |
|---|
| you rent your residence; and |
| your landlord has obtained a judgment for possession in an eviction, unlawful detainer action, or similar proceeding (called eviction |

Landlord's name Mackinac Savings Bank

Landlord's address 38345 W. 10 Mile Rd. Ste., 100

judgment) against you to possess your residence.

Farmington, MI 48335

Number, Street, City, State & ZIP Code

If you want to stay in your rented residence after you file your case for bankruptcy, also complete the certification below.

Certification About Applicable Law and Deposit of Rent

I certify under penalty of perjury that:

- Under the state or other nonbankruptcy law that applies to the judgment for possession (*eviction judgment*), I have the right to stay in my residence by paying my landlord the entire delinquent amount.
- I have given the bankruptcy court clerk a deposit for the rent that would be due during the 30 days after I file the *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).

X /s/ Jay Alan Wendel

/s/ Sandra Louise Wendel
Sandra Louise Wendel

Jay Alan Wendel Signature of Debtor 1

Signature of Debtor 2

Date September 15, 2016

Date September 15, 2016

Stay of Eviction: (a)

- First 30 days after bankruptcy. If you checked both boxes above, signed the form to certify that both apply, and served your landlord with a copy of this statement, the automatic stay under 11 U.S.C. § 362(a)(3) will apply to the continuation of the eviction against you for 30 days after you file your *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).
- (b) Stay after the initial 30 days. If you wish to stay in your residence after that 30-day period and continue to receive the protection of the automatic stay under 11 U.S.C. § 362(a)(3), you must pay the entire delinquent amount to your landlord as stated in the eviction judgment before the 30-day period ends. You must also fill out Statement About Payment of an Eviction Judgment Against You (Official Form 101B), file it with the bankruptcy court, and serve your landlord a copy of it before the 30-day period ends.

Check the Bankruptcy Rules (www.uscourts.gov/rulesandpolicies/rules.aspx) and the local court's website (to find your court's website, go to www.uscourts.gov/Court_Locator.aspx) for any specific requirements that you might have to meet to serve this statement.

11 U.S.C. §§ 362(b)(22) and 362(l)

Official Form 101A Initial Statement About an Eviction Judgment Against You

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Best Case Bankruptcy

| Fill in this info | ormation to identify you | r case: | | | | |
|---------------------------------|---|---------------------------|----------------|----------|--|-----------------------------------|
| Debtor 1 | Jay Alan Wendel | | | | | |
| | First Name | Middle Name | Last N | lame | | |
| Debtor 2 (Spouse, if filing) | Sandra Louise Wer | ndel Middle Name | Last N | lame | | |
| | | | | | | |
| Case number | Bankruptcy Court for the: | EASTERN DISTRIC | TOF MICHIC | SAN | | |
| B 101B Statemen | t About Paymer | t of an Evictio | n Judgm | ent / | Against You | 12/15 |
| Fill out this for | rm only if: | | | | | |
| you filed | Initial Statement About | an Eviction Judgment | Against You | (Offici | ial Form 101A); and | |
| you serve | ed a copy of Form 101A | on your landlord; and | | | | |
| | to stay in your rented re | esidence for more that | n 30 days afte | er you | file your Voluntary Petition for | Individuals Filing for Bankruptcy |
| | within 30 days after you opy on your landlord wi | | | ividual | ls Filing for Bankruptcy (Officia | l Form 101). |
| Cert | tification About Applica | ble Law and Payment | of Eviction Ju | ıdgme | ent | |
| I certify un | der penalty of perjury th | nat (Check all that apply |): | | | |
| | he state or other nonbank ce by paying my landlord | | | nt for p | possession (eviction judgment), I h | ave the right to stay in my |
| | 30 days after I filed my Vo | | | | nkruptcy (official Form 101), I have | paid my landlord the entire |
| X /s/ Ja | y Alan Wendel | | X | /s/ Sa | andra Louise Wendel | |
| • | lan Wendel ure of Debtor 1 | | | | dra Louise Wendel ature of Debtor 2 | |
| Date | September 15, 2016 | | | Date | September 15, 2016 | |

You must serve your landlord with a copy of this form.

Check the Bankruptcy Rules (www.uscourts.gov/rulesandpolicies/rules.aspx) and the court's local website (go to http://www.uscourts.gov/Court_Locator.aspx to find your court's website) for any specific requirements that you might have to meet to serve this statement.

B 101B (Official Form 101B)

Statement About Payment of an Eviction Judgment Against You

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Best Case Bankruptcy

| Fill | in this inforr | nation to identify your case: | | |
|--------|-------------------------------|---|--------|---------------------------------------|
| Deb | otor 1 | Jay Alan Wendel | | |
| Deb | otor 2 | First Name Middle Name Last Name Sandra Louise Wendel | | |
| | use if, filing) | First Name Middle Name Last Name | | |
| Unit | ted States Ba | nkruptcy Court for the: EASTERN DISTRICT OF MICHIGAN | | |
| | se number _ | | | |
| (if kn | own) | | _ | Check if this is an amended filing |
| | | | | J |
| Of | ficial Fo | rm 106Sum | | |
| | | of Your Assets and Liabilities and Certain Statistical Information | | 12/15 |
| info | rmation. Fill original for | and accurate as possible. If two married people are filing together, both are equally responsible for but all of your schedules first; then complete the information on this form. If you are filing amendents, you must fill out a new <i>Summary</i> and check the box at the top of this page. Arize Your Assets | | |
| | | | | our assets alue of what you own |
| 1. | Schedule A 1a. Copy lin | /B: Property (Official Form 106A/B) e 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy lin | e 62, Total personal property, from Schedule A/B | \$ | 6,145.00 |
| | 1c. Copy lin | e 63, Total of all property on Schedule A/B | \$ | 6,145.00 |
| Par | t 2: Summ | arize Your Liabilities | | |
| | | | | our liabilities mount you owe |
| 2. | | Creditors Who Have Claims Secured by Property (Official Form 106D) e total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 32,418.40 |
| 3. | | /F: Creditors Who Have Unsecured Claims (Official Form 106E/F) e total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 9,000.00 |
| | 3b. Copy th | e total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 74,962.84 |
| | | Your total liabilities | \$ | 116,381.24 |
| Par | t 3: Summ | arize Your Income and Expenses | | |
| 4. | | Your Income (Official Form 106I) ombined monthly income from line 12 of Schedule I | \$ | 2,009.00 |
| 5. | | Your Expenses (Official Form 106J) nonthly expenses from line 22c of Schedule J | \$ | 2,007.00 |
| Par | t 4: Answe | er These Questions for Administrative and Statistical Records | | |
| 6. | • | ng for bankruptcy under Chapters 7, 11, or 13? u have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur oth | er schedules. |
| 7. | ■ Yes | of debt do you have? | | |
| | | lebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a solid purpose," 11 LLS C. § 104(8). Fill out lines 8.0g for statistical purposes, 28 LLS C. § 150 | a pers | sonal, family, or |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

| Debtor 1 | Jay Alan Wendel |
|----------|----------------------|
| Debtor 2 | Sandra Louise Wendel |

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

| 0.00 |
|------|
| |

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cl | aim |
|--|----------|----------|
| Trom rait 4 on ocheane En , copy the following. | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 9,000.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 9,000.00 |

| | 1 J | ay Alan We | ndel | | | | | |
|-------------------|--------------------------------------|---------------------------|-----------------------|-----------|--|--|--|--|
| | | irst Name | | Name | Last Name | | | |
| Debtor Spouse, | | Sandra Louis irst Name | | Name | Last Name | | | |
| | • | ntov Court for | the: EASTERN | DISTRI | CT OF MICHIGAN | | | |
| Jillea | States Darikiu | picy Court for | LAGILITY | DIOTIKI | OT OT WHOTHOMY | | | |
| Case n | iumber | | | | | | | ☐ Check if this is amended filing |
| | | | | | | | | amended ming |
|)ffic | ial Form | 106A/R | | | | | | |
| | edule A | | - | | | | | 40/4/ |
| | | | <u> </u> | an acco | only once. If an asset fits in more than one | a category lis | t the asset in | 12/15 |
| ink it fi | its best. Be as | complete and a | accurate as possibl | e. If two | married people are filing together, both are | equally resp | onsible for su | pplying correct |
| | tion. If more spa every question. | | attach a separate sh | heet to t | his form. On the top of any additional pages | s, write your r | ame and case | e number (if known). |
| ort 1 | Docariba Each | Docidonos Pu | uilding Land or Ot | har Baal | Estate Vou Own or Have an Interest In | | | |
| art 1: | Describe Each | Residence, bu | illiding, Land, or Ot | ner Keai | Estate You Own or Have an Interest In | | | |
| Do yo | ou own or have a | any legal or eq | uitable interest in a | ny resid | lence, building, land, or similar property? | | | |
| □ No | o. Go to Part 2. | | | | | | | |
| _ | es. Where is the | n ron ortu () | | | | | | |
| — 16 | s. Where is the p | property? | | | | | | |
| | | | | | | | | |
| .1 | | | | | | | | |
| . 1 | | | | What | t is the property? Check all that each | | | |
| 82 | 202 Busko. L | Jnit 98E | | _ | t is the property? Check all that apply | D | | |
| | 202 Busko, U | | cription | | Single-family home | | | aims or exemptions. Put d claims on <i>Schedule D</i> |
| | | | cription | _ | Single-family home Duplex or multi-unit building | the amount | of any secured | |
| | | | cription | | Single-family home Duplex or multi-unit building Condominium or cooperative | the amount | of any secured | d claims on <i>Schedule D</i> |
| Str | reet address, if avail | lable, or other desc | | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount | of any secured Yho Have Clain | d claims on <i>Schedule D</i> |
| Str | reet address, if avail | lable, or other desc | 48093-0000 | - - | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | the amount Creditors V Current va entire prop | of any secured tho Have Clain lue of the perty? | d claims on Schedule D ms Secured by Property Current value of the portion you own? |
| Str | reet address, if avail | lable, or other desc | | - - | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | the amount Creditors V Current va entire prop | of any secured Tho Have Clain Iue of the | d claims on Schedule D ns Secured by Property Current value of the |
| Str | reet address, if avail | lable, or other desc | 48093-0000 | ■ | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Current va entire prop | of any secured who Have Claim lue of the lerty? Jnknown he nature of years. | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow |
| Str | reet address, if avail | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Current va entire prop | of any secured who Have Claim lue of the lerty? Jnknown he nature of years. | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow |
| Str | reet address, if avail | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one | Current va entire prop | of any secured who Have Claim lue of the herty? Jnknown he nature of your simple, tensimple, tensimple, tensimple, tensimple who have the simple of the sim | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow Tour ownership interes ancy by the entireties, |
| W Cit | reet address, if avail | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one | Current va entire prop | of any secured who Have Claim lue of the lerty? Jnknown he nature of your simple, tense), if known. | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow Tour ownership interes ancy by the entireties, |
| W Cit | reet address, if avail /arren | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only | Current va entire prop Usuch as fe a life estat | of any secured who Have Claim lue of the perty? Jnknown he nature of your sees simple, tense), if known. | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow rour ownership interes ancy by the entireties, |
| W Cit | lacomb | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current va entire prop | of any secured who Have Claim lue of the perty? Jnknown he nature of your sees simple, tense), if known. | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow Tour ownership interes ancy by the entireties, |
| W Cit | lacomb | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite | Current va entire prop | of any secured who Have Claim lue of the perty? Jinknown the nature of your simple, tender, if known. Attive Interest if this is communications) | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow rour ownership interes ancy by the entireties, |
| W Cit | lacomb | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Current va entire prop | of any secured who Have Claim lue of the perty? Jinknown the nature of your simple, tender, if known. Attive Interest if this is communications) | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow rour ownership interes ancy by the entireties, |
| W Cit | lacomb | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite | Current va entire prop | of any secured who Have Claim lue of the perty? Jinknown the nature of your simple, tender, if known. Attive Interest if this is communications) | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow rour ownership interes ancy by the entireties, |
| W Cit | lacomb | lable, or other desc | 48093-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite | Current va entire prop | of any secured who Have Claim lue of the perty? Jinknown the nature of your simple, tender, if known. Attive Interest if this is communications) | d claims on Schedule D ms Secured by Property Current value of the portion you own? Unknow our ownership interes ancy by the entireties, |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Debt Debt | | lay Alan We Sandra Lou | endel ise Wendel | | Case number (if known) | | |
|---------------|----------------|-------------------------------|--|--|---|---|--|
| 3. C a | ırs, vans | , trucks, trac | tors, sport utility ve | hicles, motorcycles | | | |
| | No | | | | | | |
| | Yes | | | | | | |
| 3.1 | Make: | Mercury | | Who has an interest in the property? Check one | | cured claims or exemptions. Put | |
| 3.1 | Model: Mariner | | | Debtor 1 only | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | | |
| | Year: | 2005 | | ☐ Debtor 2 only | Current value of | | |
| | Approxi | mate mileage: | 180,000 | ■ Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | Other in | formation: | | \square At least one of the debtors and another | | | |
| | | | | ☐ Check if this is community property (see instructions) | \$500 | 5500.00 | |
| | No Yes | ouals, trailers | , motors, personar wa | tercraft, fishing vessels, snowmobiles, motorcy | die accessories | | |
| | | | | n for all of your entries from Part 2, includin | | \$500.00 | |
| Dout 1 | Door | iha Vaur Dara | onal and Household Ite | | | | |
| | | | | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| E. | xamples: No | goods and Major appliantes | nces, furniture, linens | , china, kitchenware | | | |
| | | | Household Goo | ds and Furnishings | | \$2,000.00 | |
| E. | No | Televisions a | I phones, cameras, m | eo, stereo, and digital equipment; computers, pi nedia players, games | rinters, scanners; music c | | |
| | | | Electronics | | | \$200.00 | |
| E. | xamples: No | | d figurines; paintings, ions, memorabilia, co | prints, or other artwork; books, pictures, or othe llectibles | er art objects; stamp, coin | , or baseball card collections; | |
| | | | Baseball Bat sig | gned by Miguel Cabrera | | \$1,000.00 | |
| E. ■ | xamples: | musical instr | ographic, exercise, ar | nd other hobby equipment; bicycles, pool tables | , golf clubs, skis; canoes | | |
| OHICI | air UIIII T | UUMID | | Schedule A/B: Property | | page | |

page 2

| Debtor 1 Debtor 2 | • | | Case number | er (if known) | |
|----------------------|---|---|--|-----------------|--|
| ■ No | mples: Pistols, rifle | s, shotguns, ammunition, and rela | ted equipment | | |
| | <i>mples:</i> Everyday c | othes, furs, leather coats, designe | er wear, shoes, accessories | | |
| | | Clothing | | | \$2,000.00 |
| ☐ No | <i>mples:</i> Everyday je | ewelry, costume jewelry, engagem | ent rings, wedding rings, heirloom jewelry, watch | es, gems, gol | d, silver |
| | | Jewelry | | | \$70.00 |
| Exa □ No | -farm animals amples: Dogs, cats, oes. Describe | birds, horses | | | |
| | | Cat | | | \$25.00 |
| 15. Ad | es. Give specific in | | 3, including any entries for pages you have at | tached | \$5,295.00 |
| | Describe Your Finar | ncial Assets legal or equitable interest in any | of the following? | | Current value of the |
| Í | ŕ | | · | | portion you own? Do not deduct secured claims or exemptions. |
| □ No | <i>mples:</i> Money you o | have in your wallet, in your home, | in a safe deposit box, and on hand when you file | e your petition | |
| | | | Cash | | \$100.00 |
| Exa _ | institutions | avings, or other financial accounts If you have multiple accounts with | s; certificates of deposit; shares in credit unions, at the same institution, list each. | brokerage ho | uses, and other similar |
| ■ No |) es | | Institution name: | | |
| | amples: Bond funds | or publicly traded stocks , investment accounts with broker | age firms, money market accounts | | |
| | es | Institution or issuer nam | e: | | |

Official Form 106A/B Schedule A/B: Property page 3

| | ebtor 1 ebtor 2 | Jay Alan Wendel Sandra Louise Wendel | | ase number (if known) | |
|-----|---------------------|--|---|-------------------------------|---|
| 19. | Non-pul | • | s in incorporated and unincorporated businesses, | , including an interest in ar | LLC, partnership, and |
| | | Give specific information about th Name of en | | % of ownership: | |
| 20. | Negotia Non-ne | ble instruments include personal | other negotiable and non-negotiable instruments checks, cashiers' checks, promissory notes, and mon u cannot transfer to someone by signing or delivering | ey orders. | |
| | ■ No □ Yes. G | ive specific information about the | | | |
| 21. | | ent or pension accounts es: Interests in IRA, ERISA, Keoç | gh, 401(k), 403(b), thrift savings accounts, or other per | nsion or profit-sharing plans | |
| | | ist each account separately. Type of accou | nt: Institution name: | | |
| 22. | Your sh Example | | ove made so that you may continue service or use from repaid rent, public utilities (electric, gas, water), teleco | | others |
| | ■ No □ Yes | | Institution name or individual: | | |
| 23. | Annuitie ■ No □ Yes | | ent of money to you, either for life or for a number of y | years) | |
| 24. | Interests | | ount in a qualified ABLE program, or under a qual | lified state tuition program | |
| | ■ No □ Yes | Institution name an | d description. Separately file the records of any interes | sts.11 U.S.C. § 521(c): | |
| 25. | ■ No | equitable or future interests in Give specific information about th | property (other than anything listed in line 1), and em | rights or powers exercisal | ole for your benefit |
| 26. | | | secrets, and other intellectual property ites, proceeds from royalties and licensing agreement | ts | |
| | ■ No □ Yes. 0 | Give specific information about th | em | | |
| 27. | | s, franchises, and other general es: Building permits, exclusive lic | al intangibles enses, cooperative association holdings, liquor license | es, professional licenses | |
| | ☐ Yes. (| Give specific information about th | em | | |
| M | oney or p | roperty owed to you? | | ! ! | Current value of the portion you own? On not deduct secured claims or exemptions. |
| 28. | □ No | nds owed to you | | | |
| | Yes. G | live specific information about the | em, including whether you already filed the returns and | d the tax years | |
| | | | Anticipated Income Tax Refunds | Federal & State | \$250.00 |

Official Form 106A/B Schedule A/B: Property page 4

| Debtor 1 Debtor 2 | Jay Alan Wendel Sandra Louise Wendel | Case number (if known) | |
|------------------------|---|--|----------------------------|
| ■ No | | child support, maintenance, divorce settlement, property | settlement |
| Exam _i ■ No | amounts someone owes you ples: Unpaid wages, disability insurance payments, disa benefits; unpaid loans you made to someone else Give specific information | ability benefits, sick pay, vacation pay, workers' compere | nsation, Social Security |
| Exam ■ No | | account (HSA); credit, homeowner's, or renter's insurar | nce |
| ☐ Yes. | Name the insurance company of each policy and list its Company name: | s value. Beneficiary: | Surrender or refund value: |
| If you somed | terest in property that is due you from someone where the beneficiary of a living trust, expect proceeds from the has died. Give specific information | no has died om a life insurance policy, or are currently entitled to rece | eive property because |
| Exam ■ No | s against third parties, whether or not you have filed ples: Accidents, employment disputes, insurance claims Describe each claim | | |
| ■ No | contingent and unliquidated claims of every nature Describe each claim | , including counterclaims of the debtor and rights to | set off claims |
| ■ No | nancial assets you did not already list Give specific information | | |
| | the dollar value of all of your entries from Part 4, inc art 4. Write that number here | cluding any entries for pages you have attached | \$350.00 |
| Part 5: De | escribe Any Business-Related Property You Own or Have a | n Interest In. List any real estate in Part 1. | |
| No. G | own or have any legal or equitable interest in any business to Part 6. Go to line 38. | s-related property? | |
| | escribe Any Farm- and Commercial Fishing-Related Proper you own or have an interest in farmland, list it in Part 1. | ty You Own or Have an Interest In. | |
| ■ No. | u own or have any legal or equitable interest in any Go to Part 7. s. Go to line 47. | farm- or commercial fishing-related property? | |
| Part 7: | Describe All Property You Own or Have an Interest in Th | nat You Did Not List Ahove | |

Official Form 106A/B Schedule A/B: Property page 5

| Debtor | | | Case number (if known) | |
|--------------|---|---------------|------------------------------|------------|
| | you have other property of any kind you did not already list? kamples: Season tickets, country club membership | | | |
| | No | | | |
| | Yes. Give specific information | | | |
| 54. A | dd the dollar value of all of your entries from Part 7. Write tha | t number here | | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. P | art 1: Total real estate, line 2 | | | \$0.00 |
| 56. P | art 2: Total vehicles, line 5 | \$500.00 | | |
| 57. P | art 3: Total personal and household items, line 15 | \$5,295.00 | | |
| 58. P | art 4: Total financial assets, line 36 | \$350.00 | | |
| 59. P | art 5: Total business-related property, line 45 | \$0.00 | | |
| 60. P | art 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. P | art 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. T | otal personal property. Add lines 56 through 61 | \$6,145.00 | Copy personal property total | \$6,145.00 |
| 63. T | otal of all property on Schedule A/B. Add line 55 + line 62 | | | \$6,145.00 |

| st Name st Name tcy Court for the: | Middle Name Middle Name EASTERN DISTRICT C | Last Name Last Name PF MICHIGAN | |
|------------------------------------|--|-----------------------------------|--|
| | | | |
| | | | |
| tcy Court for the: | EASTERN DISTRICT C | F MICHIGAN | |
| | | | ☐ Check if this is an |
| | | | amended filing |
| | | | |
| 106C | | | |
| The Dre | norty Vou C | laim as Evamnt | |
| | 106C :: The Pro | | 106C : The Property You Claim as Exempt |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | . Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | | |
|----|---|--------------------------------------|-----|---|------------------------------------|--|--|--|
| | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
| | ■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/B | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | | |
| De | ebtor 1 Exemptions | | | | | | | |
| | Electronics Line from Schedule A/B: 7.1 | \$200.00 | | \$200.00 | 11 U.S.C. § 522(d)(3) | | | |
| | | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Baseball Bat signed by Miguel | \$1,000.00 | | \$1,000.00 | 11 U.S.C. § 522(d)(3) | | | |
| | Line from Schedule A/B: 8.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Jewelry Line from Schedule A/B: 12.1 | \$70.00 | | \$70.00 | 11 U.S.C. § 522(d)(4) | | | |
| | Ellie II olii osii odalo 702. Tari | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Cat Line from Schedule A/B: 13.1 | \$25.00 | | \$25.00 | 11 U.S.C. § 522(d)(5) | | | |
| | Ellie II olii osii odalo 702. 1011 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Cash Line from Schedule A/B: 16.1 | \$100.00 | | \$100.00 | 11 U.S.C. § 522(d)(5) | | | |
| | Enterior deficable PVD. 1911 | | | 100% of fair market value, up to any applicable statutory limit | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

Part 1: Identify the Property You Claim as Exempt

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|----|--|--------------------------------------|--------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Federal & State: Anticipated Income Tax Refunds | \$250.00 | | \$250.00 | 11 U.S.C. § 522(d)(5) |
| | Line from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 | | | led on or after the date of adjustme | nt.) |
| | Yes. Did you acquire the property covered No | ed by the exemption with | thin 1 | ,215 days before you filed this case | ? |
| | ☐ Yes | | | | |

| | | | | | | <u>-</u> |
|---------------------------|---|--|---|-----------------|--|--|
| Fil | I in this infor | mation to identify your cas | se: | | | |
| De | ebtor 1 | | | | | |
| | | First Name | Middle Name | L | ast Name | |
| | ebtor 2 | Sandra Louise Wen | | | | |
| (Sp | ouse if, filing) | First Name | Middle Name | L | ast Name | |
| Ur | nited States Ba | ankruptcy Court for the: | EASTERN DISTRICT OF M | ICHIG | AN | |
| | ase number | | | | | |
| (if k | known) | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| \bigcirc | fficial Fo | orm 106C | | | | |
| | | | | | | |
| <u>S</u> | chedul | e C: The Pro | perty You Cla | <u>lim</u> | as Exempt | 4/16 |
| the nee cas | property you leded, fill out ar se number (if k | listed on <i>Schedule A/B: Pro</i> , and attach to this page as manown). | perty (Official Form 106A/B) iny copies of <i>Part 2: Addition</i> | as yo nal Pa | our source, list the property that you ge as necessary. On the top of any | or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and |
| any fun exe to t | / applicable s ids—may be t emption to a p the applicable | tatutory limit. Some exemunlimited in dollar amount particular dollar amount and statutory amount. | ptions—such as those for t. However, if you claim an nd the value of the proper | heal exen | th aids, rights to receive certain b option of 100% of fair market valu | ing exempted up to the amount of penefits, and tax-exempt retirement to under a law that limits the t, your exemption would be limited |
| Pa | rt 1: Identi | fy the Property You Claim | as Exempt | | | |
| 1. | Which set o | f exemptions are you clain | ming? Check one only, eve | n if yo | ur spouse is filing with you. | |
| | ☐ You are c | laiming state and federal no | onbankruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| | You are c | laiming federal exemptions. | 11 U.S.C. § 522(b)(2) | | | |
| 2. | For any pro | perty you list on Schedule | e A/B that you claim as exe | empt, | fill in the information below. | |
| | | ion of the property and line o | n Current value of the | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | Schedule A/B | that lists this property | portion you own | | | |
| | | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| De | ebtor 2 Exer | nptions | | | | |
| | Household | I Goods and Furnishing | gs \$2,000.00 | | \$2,000.00 | 11 U.S.C. § 522(d)(3) |
| | Line from Sc | hedule A/B: 6.1 | | _ | | |
| | | | | Ц | 100% of fair market value, up to any applicable statutory limit | |
| | Clothing | | *** | | ¢2.000.00 | 11 U.S.C. § 522(d)(3) |
| | | hedule A/B: 11.1 | \$2,000.00 | - | \$2,000.00 | 0.0.0.3 0==(0)(0) |
| | | | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | (Subject to a ■ No | djustment on 4/01/19 and e | , , | ases fi | led on or after the date of adjustme | , |

Official Form 106C

No Yes

Schedule C: The Property You Claim as Exempt

| Fill in this inforr | mation to identify you | r case: | | | |
|------------------------|--|---|----------------------------|--|-----------------------------------|
| Debtor 1 | Jay Alan Wende | | | | |
| Debtor 2 | First Name Sandra Louise \ | Middle Name Last Name | | | |
| (Spouse if, filing) | First Name | Middle Name Last Name | | | |
| United States Ba | nkruptcy Court for the: | EASTERN DISTRICT OF MICHIGAN | | | |
| | , , | | | | |
| Case number _ | | | | ☐ Check | if this is an |
| (| | | | | led filing |
| | | | | | ŭ |
| Official Forn | n 106D | | | | |
| Schedule | D: Creditors | Who Have Claims Secure | ed by Property | y | 12/15 |
| | e Additional Page, fill it o | If two married people are filing together, both are out, number the entries, and attach it to this form. | | | |
| 1. Do any creditors | have claims secured by | your property? | | | |
| ☐ No. Check | this box and submit the | nis form to the court with your other schedules. | . You have nothing else to | o report on this form. | |
| Yes. Fill ir | all of the information | below. | | | |
| Part 1: List A | II Secured Claims | | | | |
| for each claim. If m | nore than one creditor has | nore than one secured claim, list the creditor separat a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. | | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Credit Ac | ceptance | Describe the property that secures the claim: | \$7,420.00 | \$500.00 | \$6,920.00 |
| Creditor's Nam | е | 2005 Mercury Mariner 180,000 miles | | | |
| | | | | | |
| P.O. Box | 5070 | As of the date you file, the claim is: Check all that apply. | _ | | |
| Southfield | d, MI 48086 | ☐ Contingent | | | |
| Number, Street | t, City, State & Zip Code | ☐ Unliquidated | | | |
| Mha awaa tha da | .h42 Ob I | Disputed | | | |
| Who owes the de | ebt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | | An agreement you made (such as mortgage or car loan) | secured | | |
| ■ Debtor 1 and De | ebtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) |) | | |
| ☐ At least one of t | he debtors and another | ☐ Judgment lien from a lawsuit | | | |
| Check if this cl | | Other (including a right to offset) | e Money Security Inte | erest | |
| Date debt was inc | | Last 4 digits of account number 8167 | 7 | | |
| | | | | | |
| | n Townhouses | Describe the property that secures the claim: | Unknown | Unknown | Unknown |
| Creditor's Nam | | 8202 Busko, Unit 98E Warren, MI | 1 | | |
| | | 48093 Macomb County | | | |
| | _ | As of the date you file, the claim is: Check all that | | | |
| 8181 Hett Warren, N | • | apply. | | | |
| | t, City, State & Zip Code | ☐ Contingent ☐ Unliquidated | | | |
| rumbor, onco | , ony, orace a zip code | ☐ Disputed | | | |
| Who owes the de | ebt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ■ An agreement you made (such as mortgage or | secured | | |
| Debtor 2 only | | car loan) | | | |
| Debtor 1 and De | ebtor 2 only he debtors and another | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit | 1 | | |
| ☐ Check if this cl | | • | tive Agreement | | |
| community de | | Carlot (moldaring a right to offset) | | | |
| Date debt was inc | urred 2001 | Last 4 digits of account number unk | nown | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

| Debto | r 1 Jay Alan We | ndel | | | | Case numb | oer (if know) | | |
|---------------|--|---------------------------------|------------------------------|--|-------------------|-------------------|----------------------|------------------------|-------------|
| | First Name | Middle Na | ame | Last Name | | | ` ' — | | |
| Debto | r 2 Sandra Louis | se Wendel | | | | | | | |
| | First Name | Middle Na | ame | Last Name | _ | | | | |
| | Mackinac Saving | s Bank, | Describe th | ne property that secure | s the claim: | \$24 | ,998.40 | Unknown | Unknown |
| | Creditor's Name | | 8202 Bus | sko, Unit 98E Warr | ren, MI | | | | |
| | 38345 W. 10 Mile 100 | Rd., Ste. | | acomb County | - | | | | |
| | Farmington Hills 18335 | , MI | As of the dapply. | ate you file, the claim is | s: Check all that | | | | |
| | Number, Street, City, State | & Zin Code | | | | | | | |
| | wes the debt? Chec | | ☐ Disputed | | <i>'</i> . | | | | |
| _ | otor 1 only otor 2 only | | An agree | ement you made (such a | s mortgage or | secured | | | |
| ■ Del | otor 1 and Debtor 2 onl | V | ☐ Statutory | y lien (such as tax lien, m | nechanic's lien) | | | | |
| ☐ At I | east one of the debtors | and another | ☐ Judgmei | nt lien from a lawsuit | | | | | |
| ☐ Ch | eck if this claim relate | | _ | ncluding a right to offset) | Purchase | e Money Se | curity Interest | <u> </u> | |
| Date d | ebt was incurred 0 | 6/22/2016 | Last | 4 digits of account nu | mber1729 | 9 | _ | | |
| Add | the dollar value of yo | ur entries in Co | olumn A on t | his page. Write that nu | mber here: | | \$32,418.40 |] | |
| | s is the last page of y that number here: | our form, add | the dollar va | lue totals from all page | s. | | \$32,418.40 | | |
| Part 2 | List Others to B | se Notified fo | r a Debt Th | at You Already Liste | ed | | | | |
| trying than o | to collect from you fo | or a debt you on the debts that | we to someo you listed in | out your bankruptcy fo ne else, list the credito n Part 1, list the addition | r in Part 1, and | d then list the o | collection agency | here. Similarly, if yo | u have more |
| | Name, Number, Street Mackinac Savino | | Zip Code | | On w | hich line in Par | t 1 did you enter th | e creditor? 2.3 | |
| | 280 N. Congress Boynton Beach, | Ave. | | | Last | 4 digits of acco | unt number | | |
| | Name, Number, Street | t, City, State & 2 | Zip Code | | On w | hich line in Par | t 1 did you enter th | e creditor? 2.3 | |
| | 31440 Northwes Farmington, MI | | Ste. 200 | | Last | 4 digits of acco | unt number | | |

| Fill in this info | rmation to identify your case | : | | | | |
|---|--|--|-----------------------------|--|---|----------------------------------|
| Debtor 1 | Jay Alan Wendel | | | | | |
| | First Name | Middle Name Last Nar | ne | | | |
| Debtor 2 | Sandra Louise Wende | el | | | | |
| (Spouse if, filing) | First Name | Middle Name Last Nar | ne | | | |
| United States B | Bankruptcy Court for the: EA | STERN DISTRICT OF MICHIGAN | | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | amend | ded filing |
| 00000 | 400E/E | | | | | |
| Official For | | | | | | 4045 |
| | | Have Unsecured Clain t 1 for creditors with PRIORITY claims | | | | 12/15 |
| Schedule G: Exec Schedule D: Cred left. Attach the Co name and case no | cutory Contracts and Unexpired I ditors Who Have Claims Secured | could result in a claim. Also list execut Leases (Official Form 106G). Do not inc by Property. If more space is needed, o you have no information to report in a F Ured Claims | lude any cre opy the Par | ditors with partially tyou need, fill it out | secured claims that a number the entries i | are listed in n the boxes on the |
| | itors have priority unsecured clai | | | | | |
| □ No. Go to | • • | | | | | |
| Yes. | | | | | | |
| Part 1. If mor | e than one creditor holds a particula | ording to the creditor's name. If you have ar claim, list the other creditors in Part 3. e instructions for this form in the instructio | | Total claim | Priority amount | Nonpriority amount |
| 2.1 Court | | Last 4 digits of account numbe | unknov r <u>n</u> | \$9,000.00 | \$9,000.00 | \$0.00 |
| 645 G | Creditor's Name riswold Ave. it, MI 48226 | When was the debt incurred? | unknov | vn | _ | |
| | Street City State Zlp Code | As of the date you file, the clair | n is: Check a | all that apply | | |
| Who incurr | red the debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 | 1 only | ☐ Unliquidated | | | | |
| Debtor 2 | 2 only | ☐ Disputed | | | | |
| Debtor 1 | 1 and Debtor 2 only | Type of PRIORITY unsecured c | laim: | | | |
| | one of the debtors and another | ■ Domestic support obligations | | | | |
| | f this claim is for a community d | _ | vou owe the | government | | |
| | n subject to offset? | ☐ Claims for death or personal in | | | | |
| ■ No | | Other. Specify | , , , , | | | |
| ☐ Yes | | Child Sup | port | | | |
| | All (V NONDDIODITY) | | | | | |
| | All of Your NONPRIORITY Ur | | | | | |
| | itors have nonpriority unsecured have nothing to report in this part. S | ubmit this form to the court with your other | schedules. | | | |
| Yes. | 5 | on one | | | | |
| unsecured cla | aim, list the creditor separately for e | in the alphabetical order of the creditor each claim. For each claim listed, identify we e other creditors in Part 3.If you have more | hat type of c | claim it is. Do not list o | laims already included | in Part 1. If more |

Total claim

| \neg | | | | |
|--------|--|---|---|------------|
| 1 | Account Services Nonpriority Creditor's Name | Last 4 digits of account number | <u>Various</u> | \$1,218.00 |
| | 1802 NE Loop 410, Ste. 400 San Antonio, TX 78217 | When was the debt incurred? | Various | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Collection | Account | |
| | Account Services Nonpriority Creditor's Name | Last 4 digits of account number | Various | \$542.00 |
| | 1802 NE Loop 410, Ste. 400 San Antonio, TX 78217 | When was the debt incurred? | Various | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| | Who incurred the debt? Check one. ☐ Debtor 1 only | - | | |
| | Debtor 2 only | ☐ Contingent | | |
| | Debtor 1 and Debtor 2 only | ☐ Unliquidated | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Miscellane | ous | |
| 7 | AFNI | Last 4 digits of account number | 5726 | \$552.00 |
| _ | Nonpriority Creditor's Name 1310 Martin Luther King Dr. P.O. Box 3517 | When was the debt incurred? | 10/28/2015 | |
| | P.O. BOX 3317 Bloomington, IL 61702 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Collection | Account | |
| | | | | |

| Debtor Debtor | 1 Jay Alan Wendel2 Sandra Louise Wendel | | Case number (if know) | |
|------------------|---|--|--|----------|
| 4.4 | Americollect | Last 4 digits of account number | 1823 | \$715.00 |
| | Nonpriority Creditor's Name 1851 S. Alverno Rd. | When was the debt incurred? | 02/18/2014 | |
| | Manitowoc, WI 54220 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | Account | |
| 1.5 | Americollect | Last 4 digits of account number | 8239 | \$715.13 |
| | Nonpriority Creditor's Name P.O. Box 1566 Manitowas WI 54334 | When was the debt incurred? | 05/23/2011 | |
| | Manitowoc, WI 54221 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | • | , | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Collection | Account | |
| 1.6 | ANES Serv. Assoc. PC | Last 4 digits of account number | 4725 | \$56.07 |
| | Nonpriority Creditor's Name P.O. Box 64000 | When was the debt incurred? | 09/2014 | |
| | DWR 641553 | mon was the dest mounted. | 03/2014 | |
| | Detroit, MI 48264 | _ | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | ı cıaım: | |
| | Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | a plane, and other similar debte | |
| | ■ No | ☐ Debts to pension or profit-sharin | | |
| | Yes | Other. Specify Medical Bil | ls | |

| Debtor Debtor | 1 Jay Alan Wendel 2 Sandra Louise Wendel | | Case number (if know) | |
|------------------|---|--|--|-------------|
| 4.7 | Celco | Last 4 digits of account number | 0676 | \$60.00 |
| | Nonpriority Creditor's Name 1140 Terex Rd. Hudson, OH 44236 | When was the debt incurred? | 06/08/2012 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Collection | Account | |
| 4.8 | Celco | Last 4 digits of account number | 0676 | \$407.00 |
| | Nonpriority Creditor's Name 1140 Terex Rd. Hudson, OH 44236 | When was the debt incurred? | 06/08/2012 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Collection | Account | |
| 4.9 | Christian Financial Credit Union | Last 4 digits of account number | 3922 | \$24,888.00 |
| | Nonpriority Creditor's Name 18441 Utica Rd. Roseville, MI 48066 | When was the debt incurred? | 04/18/2014 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Vehicle Def | iciency | |

| Christian Financial Credit Union | Last 4 digits of account number | | \$13,118.7 |
|--|--|--|------------|
| Nonpriority Creditor's Name c/o Dinning & Greve, P.L.C. 18441 Utica Road, Suite A Roseville, MI 48066 | When was the debt incurred? | 07/21/2016 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | nation agreement of arveree that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Collection | Account | |
| Crains | | D016 | \$136.9 |
| Nonpriority Creditor's Name P.O. Box 433280 | Last 4 digits of account number When was the debt incurred? | 08/2016 | φ130.3 |
| Palm Coast, FL 32143 | When was the debt incurred: | 00/2010 | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Miscellane | ous | |
| Dish Network | Last 4 digits of account number | 4351 | \$829.4 |
| Nonpriority Creditor's Name | _ | | |
| c/o AFNI 1310 Martin Luther King Dr. P.O. Box 3517 | When was the debt incurred? | 04/2016 | |
| Bloomington, IL 61702 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | Пол | | |
| Debtor 2 only | ☐ Contingent | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| _ | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | | | |
| is the claim subject to offset? | Debts to pension or profit-sharing | g plans, and other similar debts | |

Schedule E/F: Creditors Who Have Unsecured Claims

| First Fed Credit | Last 4 digits of account number | 1363 | \$241.00 |
|---|--|---|------------|
| Nonpriority Creditor's Name 2470 Chagrin Blvd, Ste. 2 Beachwood, OH 44122 | When was the debt incurred? | 11/02/2011 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| □ Debtor 1 and Debtor 2 only | Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Collection | Account | |
| First Premier Bank | Last 4 digits of account number | 6973 | \$7,813.00 |
| Nonpriority Creditor's Name 3820 N Louise Ave. Sioux Falls, SD 57107 | When was the debt incurred? | 11/2007 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | Other. Specify Miscellane | ous | |
| Henry Ford Pathology | Last 4 digits of account number | 4521 | Unknowr |
| Nonpriority Creditor's Name P.O. BOX 673835 | When was the debt incurred? | 07/05/2016 | |
| Detroit, MI 48267 Number Street City State Zlp Code | As of the date you file, the claim | is. Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim | is. Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | Other. Specify Medical Bil | Is | |

| Humana Ins. Co. | Last 4 digits of account number | 7251 | \$1,473.66 |
|--|--|---|------------|
| Nonpriority Creditor's Name P.O. Box 14603 | When was the debt incurred? | 07/2014 | |
| Lexington, KY 40512 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent ☐ Unliquidated | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| ☐ At least one of the debtors and another☐ Check if this claim is for a community debt | ☐ Student loans | | |
| Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | aration agreement or divorce that you did not | |
| ■ No □ Yes | Other. Specify Insurance | ig pians, and other similar debts | |
| I C System Inc. | | 5599 | \$200.00 |
| Nonpriority Creditor's Name P.O. BOX 64378 | Last 4 digits of account number When was the debt incurred? | 08/07/2014 | Ψ200.00 |
| Saint Paul, MN 55164 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only ■ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured Student loans | d claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | Other. Specify Collection | Account | |
| Lenox | Last 4 digits of account number | 5756 | \$53.27 |
| Nonpriority Creditor's Name P.O. Box 734 Bristol, PA 19007 | When was the debt incurred? | 12/2007 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| □ Yes | Other. Specify Miscellane | ous | |

| Sandra Louise Wendel | | Case number (if know) | |
|---|--|--|-------------|
| Macomb Orthopedic Surgeons | Last 4 digits of account number | 83AC | \$175.00 |
| Nonpriority Creditor's Name I 1900 12 Mile Rd., Ste. 110 Warren, MI 48093 | When was the debt incurred? | 01/28/2010 | |
| Narren, Mil 46093 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | I alaba. | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | i ciaim: | |
| ☐ Check if this claim is for a community lebt s the claim subject to offset? | | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ■ NO □ Yes | ■ Other. Specify Medical Bil | | |
| 1 165 | Other. Specify | | |
| Med Direct, LLC | Last 4 digits of account number | 1659 | \$125.31 |
| Nonpriority Creditor's Name 3200 Broadmoor SE Grand Rapids, MI 49512 | When was the debt incurred? | 11/2007 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| lebt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Medical Bil | ls | |
| Motor Parts Federal Credit Union | Last 4 digits of account number | 3658 | \$11,343.00 |
| Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ11,040.00 |
| 2955 University Dr. Auburn Hills, MI 48326 | When was the debt incurred? | 12/17/2013 | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. ☐ Debtor 1 only | _ | | |
| _ | Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim: | |
| At least one of the debtors and another | Student loans | a Claiiii. | |
| ☐ Check if this claim is for a community lebt s the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | | ○ . | |

| Nationwide Debt Management Solutions | Last 4 digits of account number | 3275 | \$3,466.00 |
|---|--|---|------------|
| Nonpriority Creditor's Name 3609 Bradshaw Rd. S-H-229 | When was the debt incurred? | 12/2014 | |
| Sacramento, CA 95827 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Medical Bil | ls | |
| Pain Center USA, PLLC | Last 4 digits of account number | 1590 | \$421.32 |
| Nonpriority Creditor's Name 47423 Van Dyke Warren, MI 48093 | When was the debt incurred? | 01/06/2012 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Medical Bil | ls | |
| Receivables Management | Last 4 digits of account number | Various | \$3,287.00 |
| Nonpriority Creditor's Name 23800 W. 10 Mile Rd., Ste. 150 | When was the debt incurred? | 02/28/2011 | ψο,Ξο. 1ος |
| Southfield, MI 48033 Number Street City State Zlp Code | As of the data you file the claim | in Charle all that apply | |
| Who incurred the debt? Check one. | As of the date you file, the claim | іs: Спеск ан tnat apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | | |
| Yes | ■ Other. Specify Collection | A = = = | |

Schedule E/F: Creditors Who Have Unsecured Claims

| St. Johns Macomb-Oakland | Last 4 digits of account number | 2765 | \$2,928.3 |
|--|--|---|-----------|
| Nonpriority Creditor's Name P.O. Box 773123 3123 Solutions Center | When was the debt incurred? | Various | |
| Chicago, IL 60677 Number Street City State Zlp Code | — As of the data was file the plains | in Obselve III that and by | |
| Who incurred the debt? Check one. | As of the date you file, the claim | is: Спеск ан mat арргу | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Medical Bil | <u>ls</u> | |
| Swiss Colony | Last 4 digits of account number | 0002 | Unknow |
| Nonpriority Creditor's Name 1112 Seventh Ave. | When was the debt incurred? | 12/16/2011 | |
| Monroe, WI 53566-1364 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | Пол | | |
| ■ Debtor 2 only | ☐ Contingent | | |
| _ | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| At least one of the debtors and another | Student loans | d Glaini. | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| □ Yes | ■ Other. Specify Charge Acc | | |
| | | | |
| USCB Corporation Nonpriority Creditor's Name | Last 4 digits of account number | 2011 | \$108.0 |
| 101 Harrison Street Archbald, PA 18403 | When was the debt incurred? | 07/06/2012 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Collection | Account | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 11

Debtor 1 Jay Alan Wendel Debtor 2 Sandra Louise Wendel Case number (if know) 4.2 Vision Ass. PC 8450 \$89.64 Last 4 digits of account number 8 Nonpriority Creditor's Name 28532 Schoenherr Rd. 05/2016 When was the debt incurred? Warren, MI 48088 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **MiSDU** Line 2.1 of (Check one): ■ Part 1: Creditors with Priority Unsecured Claims P.O. Box 30350 ☐ Part 2: Creditors with Nonpriority Unsecured Claims Lansing, MI 48909 Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|--------------|-----|---|-----|----|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 9,000.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 9,000.00 |
| | | | | | otal Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 74,962.84 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 74,962.84 |

| Fill in this informa | | | | | | |
|--------------------------|------------------------|--------------------|------------|--|--|------------------------------------|
| Debtor 1 Jay Alan Wendel | | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Sandra Louise We | endel | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bank | cruptcy Court for the: | EASTERN DISTRICT C | F MICHIGAN | | | |
| Case number | | | | | | Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with Name, Number | whom you have the street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | <u> </u> |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | Ony | | Oldio | 211 0000 | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | <u> </u> | | <u> </u> | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | Oity | | Olalo | 211 0000 | |
| - | Name | | | | _ |
| | Number | Street | | | <u>_</u> |
| | City | | State | ZIP Code | |

| Fill in thi | s information to identify you | ur case: | | |
|---------------------------|--|--|-------------------------------|---|
| Debtor 1 | Jay Alan Wend | el | | |
| D 1 / 0 | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, f | Sandra Louise Siling) First Name | Wendel Middle Name | Last Name | |
| United St | ates Bankruptcy Court for the | EASTERN DISTRICT (| OF MICHIGAN | |
| Case nur | mber | | | ☐ Check if this is an amended filing |
| Officia | al Form 106H | | | |
| Sche | dule H: Your Co | debtors | | 12/15 |
| fill it out, your nam | | ne boxes on the left. Attac n). Answer every question | h the Additional Page 1 1. | ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor. |
| _ | | ,, | э | |
| ■ No | | | | |
| Arizo | ona, California, Idaho, Louisiar o. Go to line 3. | na, Nevada, New Mexico, Pu | uerto Rico, Texas, Wash | y? (Community property states and territories include ington, and Wisconsin.) |
| □ Ye | es. Did your spouse, former sp | oouse, or legal equivalent liv | re with you at the time? | |
| in lir Forn | ne 2 again as a codebtor only | y if that person is a guarar | ntor or cosigner. Make | if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor Name, Number, Street, City, State and | d ZIP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | Name | | | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line |
| | Number Street | | | _ |
| | City | State | ZIP Code | |
| 3.2 | Name | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | Number Street City | State | ZIP Code | _ |

| | in this information to identify your operation 1 Jay Alan W | | | | | | | | | |
|---------------------|---|--|----------------------------|-----------|-------|--------------------------|-------------------------------|------------|----------------------------------|---------|
| | otor 2 Sandra Lou | ise Wendel | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | e: EASTERN DISTRICT | OF MICHIGAN | | | | | | | |
| | se number nown) | | | | | | mende ppleme | nt showin | g postpetition ollowing date: | • |
| O. | fficial Form 106I | | | | | MM / | / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. t1: Describe Employment Fill in your employment | ur spouse is not filing wi On the top of any additi | th you, do not inclu | de inforn | natio | on about yo case numb | our spo ber (if k | use. If mo | ore space is nswer every | needed, |
| | information. | | | | | | Debtor 2 or non-filing spouse | | | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | ☐ Employed ■ Not employed | | | | ☐ Employed ■ Not employed | | | |
| | Include part-time, seasonal, or self-employed work. | Occupation Employer's name | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | | |
| | | How long employed the | nere? | | | | _ | | | |
| Esti spou | mate monthly income as of the cuse unless you are separated. u or your non-filing spouse have me a space, attach a separate sheet to | date you file this form. If | · | | | | | | · | J |
| | o opaso, alabina coparato cinoci la | , tile (5 | | | | For Debtor | r 1 | | btor 2 or ng spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | | 0.00 | \$ | 0.00 | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add l | ine 2 + line 3. | | 4. | \$ | 0.0 | 00 | \$ | 0.00 | |

Debtor 1 Jay Alan Wendel
Sandra Louise Wendel

Case number (if known)

| | | | | Fo | r Debtor 1 | | or Debtor on-filing s | | |
|-----|------------|--|------------|-------------------|--------------------|----------------|--------------------------|--------------|-----------------|
| | Сору | line 4 here | 4. | \$ | 0.00 | \$ | m-ming s | 0.00 | |
| _ | | | | _ | | - | | | |
| 5. | | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 5e. | Insurance Domestic support obligations | 5e. 5f. | \$ \$ | 0.00 | \$ \$ | | 0.00 | |
| | 5f. 5g. | Union dues | 5g. | φ_ \$ | 0.00 | φ ₋ | | 0.00 | |
| | 5g. 5h. | Other deductions. Specify: | 5h.⊣ | : - | 0.00 | | | 0.00 | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | - 6. | * | 0.00 | \$ \$ | | 0.00 | |
| 7. | | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | | 0.00 | |
| 8. | | | | * - | 0.00 | *- | | 0.00 | |
| о. | 8a. | all other income regularly received: Net income from rental property and from operating a business, | | | | | | | |
| | · · | profession, or farm | | | | | | | |
| | | Attach a statement for each property and business showing gross | | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total | 0.0 | φ | 0.00 | φ | | 0.00 | |
| | 8b. | monthly net income. Interest and dividends | 8a. 8b. | \$ \$ | 0.00 | \$ \$ | | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | ob. | Ψ_ | 0.00 | Ψ_ | | 0.00 | |
| | 00. | regularly receive | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | | |
| | | settlement, and property settlement. | 8c. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 8e. | Social Security | 8e. | \$_ | 1,223.00 | \$_ | | 786.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance | | | | | | | |
| | | that you receive, such as food stamps (benefits under the Supplemental | | | | | | | |
| | | Nutrition Assistance Program) or housing subsidies. | | | | | | | |
| | | Specify: | _ 8f. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 8h. | Other monthly income. Specify: | _ 8h.⊣ | + \$ __ | 0.00 | - \$ | | 0.00 | |
| 9. | ۷ طط ع | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1 222 00 | \$ | | 786.00 | |
| Э. | Auu | an other meome. Add lines datobroctourderorrogron. | Э. | Ψ_ | 1,223.00 | Ψ- | | 700.00 | |
| 40 | 0-1 | olete monthly become A LUC 77 U. O. | | | 4 222 22 | | | | |
| 10. | | • | 10. \$ | | 1,223.00 + \$_ | | 786.00 | = \$ | 2,009.00 |
| | | he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | | |
| 11. | | all other regular contributions to the expenses that you list in Schedule | | | | | | | |
| | | de contributions from an unmarried partner, members of your household, your of friends or relatives. | aepen | iaent | s, your roommates | , and | 1 | | |
| | | ot include any amounts already included in lines 2-10 or amounts that are not a | vailat | ole to | pay expenses liste | ed in | Schedule | ∋ <i>J</i> . | |
| | Speci | | | | . , . | | | +\$ | 0.00 |
| | | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | | | |
| | applie | , | I LIAD | mues | and Related Data, | ш | 12. | \$ | 2,009.00 |
| | | | | | | | | Camabin | |
| | | | | | | | | Combin | iea / income |
| 13. | Do yo | ou expect an increase or decrease within the year after you file this form? | • | | | | | | , |
| | | No. | | | | | | | |
| | | Yes. Explain: | | | | | | | |
| | | · | | | | | | | |

| | in this informs | ition to identify yo | OUT 0000: | | | 1 | | |
|------|----------------------------|----------------------|---------------------------|---|-----------------------|------------------|------------------------------------|---|
| | | | | | | . . | | |
| Deb | tor 1 | Jay Alan We | endel | | | | c if this is: An amended filing | |
| | tor 2 ouse, if filing) | Sandra Loui | se Wend | el | | | A supplement show | ving postpetition chapter the following date: |
| Unit | ed States Bankr | ruptcy Court for the | EASTE | RN DISTRICT OF MICHIG | AN | <u> </u> | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | 12/15 |
| Be a | as complete ormation. If m | and accurate as | s possible. eded, atta | . If two married people ar ich another sheet to this | | | | |
| Par | | ribe Your House | ehold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | □ No. Go to | | in a aanar | oto havoohald? | | | | |
| | | | ın a separ | ate household? | | | | |
| | ■ N □ Y | | st file Offici | al Form 106J-2, <i>Expense</i> s | for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| | dependents | names. | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 3. | Do your exr | enses include | _ | | | | | ☐ Yes |
| 0. | expenses o | f people other t | han $_{\square}$ | No | | | | |
| | yourself and | d your depende | nts? ⊔ | Yes | | | | |
| exp | imate your ex | | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | h assistance an | | government assistance in Sluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| 4. | | | | ses for your residence. | nclude first mortgage | e 4. \$ | | 127.00 |
| | , , | nd any rent for th | e ground o | of IOT. | | 4. Φ | | .2 |
| | If not includ | led in line 4: | | | | | | |
| | | estate taxes | | | | 4a. \$ | | 0.00 |
| | • | rty, homeowner's | | 's insurance ıpkeep expenses | | 4b. \$ 4c. \$ | | 80.00 |
| | | owner's associat | | | | 4c. \$ | | 0.00 400.00 |
| 5. | | | | our residence, such as ho | me equity loans | 5. \$ | | 0.00 |

Official Form 106J Schedule J: Your Expenses 16-52799-mbm Doc 1 Filed 09/15/16 Entered 09/15/16 17:35:30 Page 38 of 57

Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Official Form 106J Schedule J: Your Expenses 16-52799-mbm Doc 1 Filed 09/15/16 Entered 09/15/16 17:35:30 Page 39 of 57

| Fill in this inform | nation to identify your | | | |
|---------------------------------------|---|--------------------------|---|---|
| Fill in this inform | nation to identify your | case: | | |
| Debtor 1 | Jay Alan Wendel First Name | Medalla Nassa | LastNava | |
| Debtor 2 | | Middle Name | Last Name | |
| (Spouse if, filing) | Sandra Louise W First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | EASTERN DISTRICT O | F MICHIGAN | |
| C | | | | |
| Case number | | | | ☐ Check if this is an amended filing |
| | | | | |
| Official Form | <u>n 106Dec</u> | | | |
| Declarat | ion About a | an Individual | Debtor's Schedules | 12/15 |
| obtaining money years, or both. 18 | | n connection with a bank | or amended schedules. Making a false struptcy case can result in fines up to \$25 | |
| Did you pay | or agree to pay some | one who is NOT an attor | ney to help you fill out bankruptcy forms | ? |
| ■ No | | | | |
| ☐ Yes. N | lame of person | | | Bankruptcy Petition Preparer's Notice, tion, and Signature (Official Form 119) |
| | ty of perjury, I declare true and correct. | that I have read the sum | mary and schedules filed with this decla | ration and |
| X /s/ Jav | Alan Wendel | | X /s/ Sandra Louise Wende | I |
| | n Wendel | | Sandra Louise Wendel | |
| Signatur | e of Debtor 1 | | Signature of Debtor 2 | |
| Date S | September 15, 2016 | | Date September 15, 2010 | 6 |
| | | | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| œ. | lin Al | io informatio | n to identify your o | | | | | | | |
|-------------------|---|--------------------------------------|------------------------|---|------------|---|---|----------|--|-------|
| | | | n to identify your c | ase. | | | | | | |
| De | btor 1 | | ay Alan Wendel | Middle Name | I | ast Name | | | | |
| De | btor 2 | | andra Louise We | | - | act Hamb | | | | |
| (Sp | ouse if, | | rst Name | Middle Name | L | ast Name | | | | |
| Un | ited S | States Bankrup | otcy Court for the: | EASTERN DISTRICT OF | F MICHIC | AN | | | | |
| | se nu nown) | umber | | | | | | _ | neck if this is an nended filing | |
| St Be | ate | omplete and a | Financial A | ffairs for Indivi | are filing | together, both are | equally responsible | | | 4/10 |
| | rt 1: | <u> </u> | | al Status and Where Yo | u Lived E | Before | | | | |
| 1. | | What is your current marital status? | | | | | | | | |
| | _ | | | | | | | | | |
| | | Married Not married | | | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | |
| | | No Yes. List all o | of the places you live | d in the last 3 years. Do r | not includ | e where you live nov | ٧. | | | |
| | De | btor 1 Prior A | ddress: | Dates Debtor 1 lived there | | Debtor 2 Prior Ad | ddress: | | Dates Debtor 2 lived there | |
| 3. stat | | | | live with a spouse or le | | | | | | perty |
| | | No | | | | | | | | |
| | | | | | | | | | | |
| Pa | rt 2 | Explain the | Sources of Your I | ncome | | | | | | |
| 4. | Fill i | in the total am | ount of income you r | oyment or from operation operation operation operation all jobs and the income that you receive | all busine | esses, including part | -time activities. | ıs calen | dar years? | |
| | | No | | | | | | | | |
| | | Yes. Fill in th | e details. | | | | | | | |
| | _ | | | | | | D 14 6 | | | |
| | | | | ebtor 1 | | | Debtor 2 | | 0 | |
| | | | | ources of income theck all that apply. | (befo | s income re deductions and sions) | Sources of income Check all that apply. | | Gross income (before deductionand exclusions) | ns |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

| ebtor ebtor | | y Alan We Indra Loui | ndel se Wendel | | Cas | e number (if known) | |
|----------------|----------------------|--|---|--|---|---|--|
| Ind an | clude ind d other | come regard public benef | lless of wheth it payments; | ner that income is taxable. E pensions; rental income; in | | llimony; child suppo ted from lawsuits; r | ort; Social Security, unemployment, oyalties; and gambling and lottery btor 1. |
| Lis | st each | source and t | he gross inco | ome from each source sepa | rately. Do not include income t | hat you listed in line | e 4. |
| | l No | | | | | | |
| | _ | Fill in the de | etails. | | | | |
| | | | | Debtor 1 | | Debtor 2 | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inco | Gross income (before deductions and exclusions) |
| | | / 1 of curre filed for bar | nt year until ikruptcy: | Social Security | \$11,007.00 | Social Securi | \$6,804.00 |
| | | dar year: December | 31, 2015) | Social Security | \$14,712.00 | Social Securi | ty \$9,072.00 |
| | | dar year be December | | Social Security | \$14,712.00 | Social Securi | ty \$9,072.00 |
| • | No. | During the No. Yes * Subject Debtor 1 of | 90 days before Go to line 7 List below 6 paid that crunot include to adjustment or Debtor 2 or 90 days before Go to line 7 List below 6 | personal, family, or housely personal, family, or housely pre you filed for bankruptcy, and creditor to whom you peditor. Do not include payments to an attorney for ton 4/01/19 and every 3 year both have primarily controlled for bankruptcy, and creditor to whom you peach creditor to whom yo | did you pay any creditor a total of \$6,425* or more in the bankruptcy case. ars after that for cases filed on sumer debts. did you pay any creditor a total opaid a total of \$600 or more and opaid a total | I of \$6,425* or more paying on a children or after the date of I of \$600 or more? | ments and the total amount you ld support and alimony. Also, do adjustment. |
| 0 | · v o al i t o vl | a Nama an | attorney for | this bankruptcy case. | ment Total amount | Amazint vair | Was this payment for |
| C | reditor' | s Name and | attorney for | | nent Total amount paid | Amount you still owe | Was this payment for |

| | btor 1 Jay Alan Wendel btor 2 Sandra Louise Wendel | | Cas | se number (if known) | | |
|-----|--|---|--|---|-----------------------------------|--|
| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pay | yment for |
| | Credit Acceptance 25505 W. 12 Mile Rd., Ste. 3000 | 07/2016-09/2016 | \$777.00 | \$7,420.00 | ☐ Mortgage | |
| | Southfield, MI 48034 | | | | Car | |
| | Soutifield, Mil 40034 | | | | ☐ Credit Ca | |
| | | | | | ☐ Loan Rep | ayment |
| | | | | | ☐ Suppliers ☐ Other | or vendors |
| 7. | Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any general control, or owner of 20% of | neral partners; partners or more of their voting | erships of which yog g securities; and a | ou are a genera ny managing ag | I partner; corporation gent, including one fo |
| | ■ No | | | | | |
| | Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | this payment |
| 3. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No | | yments or transfer a | any property on a | ccount of a de | bt that benefited ar |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for to | this payment tor's name |
| Ра | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | | | | |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the case | |
| | Mackinac Savings Bank, FSB v. | Landlord / Tenant | 37th District Co | ourt | ☐ Pending | |
| | Jay & Sandra Wendel | | 8300 Common | | ☐ On appea | al |
| | 166382LT | | Warren, MI 480 | 93 | ■ Conclude | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below. | | erty repossessed, f | oreclosed, garni | shed, attached | , seized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happene | d | | | property |
| | Christian Financial Credit Union | 2010 Chrysler 300 | u | 12/2 | 015 | Unknown |
| | 18441 Utica Rd. Roseville, MI 48066 | ■ Property was reposs □ Property was foreclo □ Property was garnish | sed. | | | |
| | | ☐ Property was attached | ed, seized or levied. | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| | otor 1 Jay Alan Wendel Sandra Louise Wendel | Case number (| if known) | | | | | |
|-----|--|---|---|--------------------------|--|--|--|--|
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details. Creditor Name and Address | otcy, did any creditor, including a bank or financial ins ause you owed a debt? Describe the action the creditor took | titution, set off any a | mounts from your Amount | | | | |
| | Creditor Name and Address | Describe the action the creditor took | taken | Amount | | | | |
| 12. | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes | | | | | | | |
| Par | List Certain Gifts and Contributions | | | | | | | |
| 13. | ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | tcy, did you give any gifts with a total value of more the | Dates you gave the gifts | Value | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |
| 14. | ■ No □ Yes. Fill in the details for each gift or con Gifts or contributions to charities that tot more than \$600 | | Dates you contributed | \$600 to any charity? | | | | |
| | Charity's Name | | | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | | | | | | | |
| Par | t 6: List Certain Losses | | | | | | | |
| 15. | Within 1 year before you filed for bankrupt or gambling? | cy or since you filed for bankruptcy, did you lose anytl | hing because of thef | t, fire, other disaster, | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | how the loss occurred | escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | | | |
| Par | t 7: List Certain Payments or Transfers | | | | | | | |
| | Within 1 year before you filed for bankruptconsulted about seeking bankruptcy or pro- Include any attorneys, bankruptcy petition pre- | cy, did you or anyone else acting on your behalf pay o paring a bankruptcy petition? parers, or credit counseling agencies for services required | | ty to anyone you | | | | |
| | □ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | |
| | Law Offices of Joshua B. Sanfield, PLLC 28850 Mound Rd. Warren, MI 48092 joshuasanfield@gmail.com Debtors | \$1,000.00 | 09/15/16 | \$1,000.00 | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 17. | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you | s or to make payments | | | transfer any propei | ty to anyone who |
|-----|--|---|-----------------------------|-----------------|--|---|
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | Description and vertransferred | alue of any prop | erty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankruptor transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already | siness or financial affa de as security (such as the | irs? ne granting of a se | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | | December (1 and 1 | | | | Data tasas farance |
| | Person Who Received Transfer Address | Description and vo | | | ny property or received or debts hange | Date transfer was made |
| | Person's relationship to you | | | | | |
| 19. | Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote | | y property to a s | elf-settled tru | st or similar device o | of which you are a |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of trust | Description and v | alue of the prope | erty transferre | ed | Date Transfer was made |
| Par | 8: List of Certain Financial Accounts, Inst | ruments, Safe Deposit | Boxes, and Stor | age Units | | made |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or | other financial accour | nts; certificates o | of deposit; sha | | , , |
| | houses, pension funds, cooperatives, associated No | ations, and other finan | cial institutions. | | | |
| | Yes. Fill in the details. | | | | | |
| | | Last 4 digits of account number | Type of accountinstrument | clos | e account was sed, sold, ved, or usferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for | bankruptcy, any | safe deposit | box or other deposi | tory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had accommodate Address (Number, State and ZIP Code) | | Describe the c | ontents | Do you still have it? |
| 22. | Have you stored property in a storage unit or | place other than your | home within 1 y | ear before yo | u filed for bankruptc | y? |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St | | Describe the c | ontents | Do you still have it? |
| | | State and ZIP Code) | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

| Par | t 9: | Identify Property You Hold or Control for | Someone Else | | | | | | |
|-----|---|---|--|-------|-----------------------------------|-----------------------|--|--|--|
| 23. | | you hold or control any property that someo someone. | one else owns? Include any proper | ty y | ou borrowed from, are storing fo | r, or hold in trust | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | | /ner's Name dress (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | scribe the property | Value | | | |
| Par | t 10: | Give Details About Environmental Informa | ation | | | | | | |
| For | the p | ourpose of Part 10, the following definitions | apply: | | | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | | |
| | | means any location, facility, or property as wn, operate, or utilize it, including disposal | - | law, | whether you now own, operate, | or utilize it or used | | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | | |
| Rep | ort a | ll notices, releases, and proceedings that yo | ou know about, regardless of wher | n the | ey occurred. | | | | |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| 26. | Hav | e you been a party in any judicial or adminis | strative proceeding under any envi | ironi | mental law? Include settlements | and orders. | | | |
| | | No | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case | | | |
| Par | t 11: | Give Details About Your Business or Con | · | | | | | | |
| 27. | Wit | – hin 4 years before you filed for bankruptcy, o | did vou own a business or have ar | ıv of | the following connections to an | v business? | | | |
| | | ☐ A sole proprietor or self-employed in a t | • | - | | , | | | |
| | | ☐ A member of a limited liability company | | | • | | | | |
| | | ☐ A partner in a partnership | • | . ` | • | | | | |
| | | ☐ An officer, director, or managing execut | tive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

| | otor 1 Jay Alan Wendel otor 2 Sandra Louise Wendel | Ca | ase number (if known) |
|-------------|--|---|---|
| | ■ No. None of the above applies. Go to □ Yes. Check all that apply above and file | Part 12. Il in the details below for each business. | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed |
| 28. | Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below. | otcy, did you give a financial statement to a | nnyone about your business? Include all financial |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | |
| Pa | t 12: Sign Below | | |
| are with | | a false statement, concealing property, or o | declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both. |
| /s/ | Jay Alan Wendel | /s/ Sandra Louise Wendel | |
| Ja | / Alan Wendel | Sandra Louise Wendel | |
| Sig | nature of Debtor 1 | Signature of Debtor 2 | |
| Da | e September 15, 2016 | Date September 15, 2016 | |
| Did ■ N | | ent of Financial Affairs for Individuals Filin | ng for Bankruptcy (Official Form 107)? |
| | you pay or agree to pay someone who is no lo 'es. Name of Person Attach the <i>Bankre</i> | , | |

United States Bankruptcy Court Eastern District of Michigan

| In re | | an Wendel a Louise Wendel | | Case No. | | | | |
|---------|---|---|---|--|--|--|--|--|
| - | Julian | 200100 11011001 | Debtor(s) | Chapter 7 | | | | |
| | | | T OF ATTORNEY FOR DEBTO ANT TO F.R.BANKR.P. 2016(b) | R(S) | | | | |
| | The und | ersigned, pursuant to F.R.Bankr.P. 2016(b) | | | | | | |
| 1. | | ersigned is the attorney for the Debtor(s) in | | | | | | |
| 2. | | ppensation paid or agreed to be paid by the | | eck onel | | | | |
| | [X] | FLAT FEE | (,) | | | | | |
| | A. | For legal services rendered in contempla exclusive of the filing fee paid | | | | | | |
| | B. | Prior to filing this statement, received | | | | | | |
| | C. | The unpaid balance due and payable is . | | 0.00 | | | | |
| | [] | <u>RETAINER</u> | | | | | | |
| | A. | Amount of retainer received | | | | | | |
| | В. | The undersigned shall bill against the ret agreed to pay all Court approved fees an | | r attach firm hourly rate schedule.] Debtor(s) have the retainer. | | | | |
| 3. | \$ <u>335</u> | .00 of the filing fee has been paid. | | | | | | |
| 4. | | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.] | | | | | | |
| | A. | Analysis of the debtor's financial situation bankruptcy; | a, and rendering advice to the debtor | in determining whether to file a petition in | | | | |
| | B. C. D. E. F. G. | Preparation and filing of any petition, sch Representation of the debtor at the meetin Representation of the debtor in adversary Reaffirmations; Redemptions; Other: exemption planning; filing of reaffing | g of creditors and confirmation hear proceedings and other contested ban | ing, and any adjourned hearings thereof; lkruptcy matters; | | | | |
| 5. | By agre | ement with the debtor(s), the above-disclose | ed fee does not include the following by dischargeability actions, jud | | | | | |
| 5. | The sou A. B. | | n: ges, compensation for services perfo ng the identity of payor) | rmed | | | | |
| 7. | | ersigned has not shared or agreed to share, ion, any compensation paid or to be paid ex | | th members of the undersigned's law firm or | | | | |
| Dated: | Septe | ember 15, 2016 | | shua B. Sanfield | | | | |
| | | | Joshu Law O 28850 Warre | ey for the Debtor(s) a B. Sanfield P66184 offices of Joshua B. Sanfield, P.L.L.C. Mound Rd. n, MI 48092 73-9000 joshuasanfield@gmail.com | | | | |
| Agreed: | <u>/s</u> / Ja | y Alan Wendel | /s/ Sar | ndra Louise Wendel | | | | |
| | Jay A | klan Wendel r | Sandr Debtor | a Louise Wendel | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter | 7 : | Liquidation |
|---------|------------|--------------------|
| 9 | 3245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| 9 | 335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

| In re | Jay Alan Wendel Sandra Louise Wendel | | Case No. | | |
|-------------|---|--|---|--|--|
| 220 | Sandra Louise Wender | Debtor(s) | Chapter 7 | | |
| | VERIF | FICATION OF CREDITOR | R MATRIX | | |
| The ab | ove-named Debtors hereby verify tha | t the attached list of creditors is true and | correct to the best of their knowledge. | | |
| Date: | September 15, 2016 | /s/ Jay Alan Wendel | /s/ Jay Alan Wendel | | |
| | | Jay Alan Wendel | Jay Alan Wendel | | |
| | | Signature of Debtor | | | |
| Date: Septe | September 15, 2016 | /s/ Sandra Louise Wendel | /s/ Sandra Louise Wendel | | |
| | | Sandra Louise Wendel | Sandra Louise Wendel | | |
| | | | | | |

Account Services 1802 NE Loop 410, Ste. 400 San Antonio, TX 78217

AFNI 1310 Martin Luther King Dr. P.O. Box 3517 Bloomington, IL 61702

Americollect 1851 S. Alverno Rd. Manitowoc, WI 54220

Americollect P.O. Box 1566 Manitowoc, WI 54221

ANES Serv. Assoc. PC P.O. Box 64000 DWR 641553 Detroit, MI 48264

Celco 1140 Terex Rd. Hudson, OH 44236

Christian Financial Credit Union 18441 Utica Rd. Roseville, MI 48066

Christian Financial Credit Union c/o Dinning & Greve, P.L.C. 18441 Utica Road, Suite A Roseville, MI 48066

Crains P.O. Box 433280 Palm Coast, FL 32143

Credit Acceptance P.O. Box 5070 Southfield, MI 48086 Dish Network c/o AFNI 1310 Martin Luther King Dr. P.O. Box 3517 Bloomington, IL 61702

First Fed Credit 2470 Chagrin Blvd, Ste. 2 Beachwood, OH 44122

First Premier Bank 3820 N Louise Ave. Sioux Falls, SD 57107

Henry Ford Pathology P.O. BOX 673835 Detroit, MI 48267

Humana Ins. Co. P.O. Box 14603 Lexington, KY 40512

I C System Inc. P.O. BOX 64378 Saint Paul, MN 55164

Lenox P.O. Box 734 Bristol, PA 19007

Lexington Townhouses Cooperative 8181 Hettenberger Warren, MI 48093

Mackinac Savings Bank 280 N. Congress Ave. Boynton Beach, FL 33426

Mackinac Savings Bank, FSB 38345 W. 10 Mile Rd., Ste. 100 Farmington Hills, MI 48335

Macomb Orthopedic Surgeons 11900 12 Mile Rd., Ste. 110 Warren, MI 48093

Med Direct, LLC 3200 Broadmoor SE Grand Rapids, MI 49512

MiSDU P.O. Box 30350 Lansing, MI 48909

Motor Parts Federal Credit Union 2955 University Dr. Auburn Hills, MI 48326

Nationwide Debt Management Solutions 3609 Bradshaw Rd. S-H-229 Sacramento, CA 95827

Pain Center USA, PLLC 47423 Van Dyke Warren, MI 48093

Receivables Management 23800 W. 10 Mile Rd., Ste. 150 Southfield, MI 48033

St. Johns Macomb-Oakland P.O. Box 773123 3123 Solutions Center Chicago, IL 60677

Swiss Colony 1112 Seventh Ave. Monroe, WI 53566-1364

Trott Law 31440 Northwestern Hwy., Ste. 200 Farmington, MI 48334

U.S. Trustee 211 W. Fort St., Ste. 700 Detroit, MI 48226

USCB Corporation 101 Harrison Street Archbald, PA 18403 Vision Ass. PC 28532 Schoenherr Rd. Warren, MI 48088

Wayne County Friend of the Court 645 Griswold Ave. Detroit, MI 48226